PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

	tion Act of 1995	no persons are required	to rest	oond to a collection of	informatio	n unless it displays	a valid OMB control number	
Effective on 12/08/2004. pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005				Complete if Known				
				Application Numbe	10783722			
			_ [Filing Date	02/	02/20/2004		
				First Named Invent	or Pet	Peter Vail		
Applicant eleims amall antity status. See 27 CER 4 27				Examiner Name	Rai	Ramon Ramirez		
✓ Applicant claims small entity status. See 37 CFR 1.27				Art Unit 3632				
TOTAL AMOUNT OF PA	YMENT (\$)	225		Attorney Docket No	508	6-0001		
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES								
Application Type	Fee (\$)	<u>small Entity</u> Fee (\$) <u>Fe</u>	ee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees_Paid (\$)	
Utility	300		00	250	200	100		
Design	200	100 1	00	50	130	65		
Plant	200	100 3	00	150	160	80		
Reissue	300	150 5	00	250	600	300		
Provisional	200	100	0	0	0	0		

2. EXCESS CLAIM FEES

Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims

360 **Total Claims** Extra Claims Fee Paid (\$) Fee (\$) Multiple Dependent Claims - 20 or HP = 100 _1_ Fee (\$) HP = highest number of total claims paid for, if greater than 20. **Extra Claims** Indep. Claims Fee (\$) Fee Paid (\$) - 3 or HP =

HP = highest number of independent claims paid for, if greater than 3.

Other (e.g., late filing surcharge): Extension Fee

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50

sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee Paid (\$) / 50 = (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$)

Non-English Specification, \$130 fee (no small entity discount)

225

Small Entity

Fee (\$)

25

100

180

Fee Paid (\$)

Fee (\$)

50

200

SUBMITTED BY Registration No. 40,588 Telephone 972-578-5669 Signature (Attorney/Agent) Name (Print/Type) Michael L. Diaz

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date

09/20/2005

The Research Reduction Act of 100	U.S. I	PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031 Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE						
A REPUBLICATION ACTOR 199	Application Number	llection of information unless it displays a valid OMB control number. 10/783722						
TRANSMITTAL	Filing Date	02/20/2004						
FORM	First Named Inventor	Peter Vail						
	· Art Unit	3632						
(to be used for all correspondence after initia	Examiner Name	Ramon Ramirez						
Total Number of Pages in This Submission	Attorney Docket Number	5086-0001						
ENCLOSURES (Check all that apply)								
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocatio Change of Correspondence A Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD	After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):						
Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks Amendment is 12 pages. Fee is for extension fee.							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT								
Firm Name Michael L. Diaz, P.C.								
Signature Mand								
Printed name Mighael L. Diaz	nted name Michael L. Diaz							

CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature Date MIchael L. Diaz, 09/20/2005 Typed or printed name

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40,588

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